Transforming Safety, Communication, and Efficiency: The Huddle/Lunch Buddy Initiative
Heather Machado, RN
Hartford Hospital
Cheryl Ficara, Deborah Tetreault, Maria Tackett, Matthew Manufo

Background:
The acuity and number of patients and families we serve is increasing at a rapid rate. ISBAR patient hand-off to all healthcare providers is needed to afford evidence based team work. ISBAR communication is driven by frontline nurses who identify: safety issues, work flow, core measures, and the ongoing “in the moment needs” of the patients and families. In providing the best care, clear communication is needed between all health care providers.

Purpose:
The purpose of this study was to; 1) determine whether our patient care teams communicate effectively in a timely manner, 2) evaluate the communication of nurses for relief of patient care during break and meal times, and 3) development of a “team huddle” enhancing communication within a unit.

Materials and Methods:
A Huddle/Lunch Buddy tool kit and education was given to all Nurse Managers with access to a huddle coach. Seven units were surveyed at the twelve week mark for findings, best practices and barriers to team huddling. Updates were disseminated through the Nurse Council News Letter and combined Nurse Council Structure, a Shared Governance convening body.

Results:
Nursing units vary on huddling consistency and providers identified important behaviors to enhance team effectiveness and processes while huddling. There are varied healthcare providers who attend unit huddles.

Conclusions:
A template is needed to guide the huddling process. Huddling should be limited to 10 minutes and needs to be done every 8-12 hours. 95% of floors now huddling, increased huddling on off shifts, “true buddy “system piloted. Huddling requires Charge Nurse training and support with healthcare provider participation.

Bibliography:


ACE has published this as received and with permission from the author(s).


